



# CITY OF SAN DIEGO

PURCHASING & CONTRACTING DEPT.  
1200 Third Avenue, Suite 200  
San Diego, CA 92101-4195

Proposal No. 9439-09-Z-RFP

## REQUEST FOR PROPOSAL

Closing Date: August 21, 2008  
@ 4:00 pm P.S.T.

**Subject:** Furnish the City of San Diego with Professional Public Outreach, Involvement, and Facilitation Services for the City of San Diego Uptown, Greater North Park, and Greater Golden Hill Community Plan Update Process

**Timeline:** As may be required for a period of two (2) years from date of a fully executed Contract, with options to renew for three (3) additional one (1) year periods, in accordance with the attached specifications.

License(s) Required: N/A

Company Collaborative Services

Federal Tax I.D. No. 33-0916311

Street Address 427 C Street, Suite 200

City San Diego

State California Zip Code 92101

Tel. No. (619) 232-2112 Fax No. (619) 232-2012

E-Mail Catherine@collaborativeservices.biz

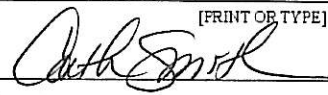
If your firm is not located in California, are you authorized to collect California sales tax? ☐ Yes ☐ No

If Yes, under what Permit # \_\_\_\_\_

City of San Diego Business Tax License #: B1998007588

Name Catherine Smith, JD

[PRINT OR TYPE]

Signature\* 

Title President

Date August 21, 2008

*\*Authorized Signature: The signer declares under penalty of perjury that she/he is authorized to sign this document and bind the company or organization to the terms of this agreement.*

**SUBMITTED BIDS MUST HAVE AN ORIGINAL SIGNATURE.**

Cash discount terms \_\_\_\_\_ % \_\_\_\_\_ days. [Terms of less than 20 days will be considered as Net 30 for bid evaluation purposes.]

### FOR CONSIDERATION AS A RESPONSIVE PROPOSAL, THE FOLLOWING IS REQUIRED:

- 1) Proposal must be submitted on official City proposal forms.
- 2) All information on this Request for Proposal cover page must be completed.
- 3) This cover page must be signed with an original signature.
- 4) Beginning January 1, 2008, all Proposers must complete the Vendor Registration Form. Eventually, this form will also be available for on-line submittal.
- 5) Proposal must be submitted on or before the exact closing date and time. Proposal received after the exact closing date and time will NOT be considered. If hand delivering, please allow enough time for travel and parking to submit by the closing date and time.

FOR FURTHER INFORMATION CONCERNING THIS PROPOSAL, PLEASE CONTACT:

MICHAEL WINTERBERG, CPPB/muw, Procurement Specialist

Phone: (619) 533-6441

Fax: (619) 533-3230

E-mail: [MWinterberg@san Diego.gov](mailto:MWinterberg@san Diego.gov)

Proposal No. 9439-09-Z

**PRICING PAGE**

**PRICING FOR CORE REQUIREMENTS AND DELIVERABLES AS SPECIFIED IN  
RFP SECTION II**

1. Project Administration	<u>\$145,600</u> Fixed Price Lump Sum
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2. Community Outreach, Meeting Facilitation, and Public Participation	<u>\$580,140</u> Fixed Price Lump Sum
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<b>Fixed Price Lump Sum Total:</b>	<b><u>\$ 725,740</u></b>
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**PROPOSER'S STATEMENT OF FINANCIAL RESPONSIBILITY**

The Proposer is required to furnish below a statement of financial responsibility, except when the Proposer has previously completed contracts with the City of San Diego covering work of similar scope.

I, Catherine Smith, JD, certify that my company, Collaborative Services, has sufficient operating capital and/or financial reserves to properly fund the services identified in these contract specifications for a minimum of two (2) full months. I agree that upon notification of provisional award, I will promptly provide a copy of my company's most recent balance sheet, or other necessary financial statements, as supporting documentation for this statement, if requested. I understand that this balance sheet, as well as any other required financial records, will remain confidential information to the extent allowed under the California Public Records Act.

I certify under penalty of perjury under the laws of the State of California that the information contained in this statement is true and correct.

Dated: August 21, 2008

Signature: \_\_\_\_\_



**THIS DOCUMENT MUST BE COMPLETED,  
SIGNED, AND SUBMITTED PRIOR TO CONTRACT AWARD**

**DRUG-FREE WORKPLACE  
CONTRACTOR CERTIFICATION**

**PROPOSAL NUMBER:**

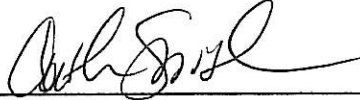
**PROJECT TITLE:** Professional Public Outreach, Involvement, and Facilitation Services

I hereby certify that I am familiar with the requirements of **San Diego City Council Policy No. 100-17** regarding Drug-Free Workplace as outlined in the request for proposals, and that,

Collaborative Services

(Name under which business is conducted)

has in place a Drug-Free Workplace Program that complies with said policy. I further certify that each subcontract agreement for this project contains language which indicates the SubContractor's agreement to abide by the provisions of subdivisions a) through c) of the policy as outlined.

SIGNED: 

PRINTED NAME: Catherine Smith, JD

TITLE: President

COMPANY NAME: Collaborative Services

ADDRESS: 427 C Street, Suite 200

San Diego, California 92101

TELEPHONE: (619) 232-2112 FAX: (619) 232-2012

DATE: August 21, 2008



City of San Diego

**EQUAL OPPORTUNITY CONTRACTING (EOC)**

1200 Third Avenue • Suite 200 • San Diego, CA 92101

Phone: (619) 236-6000 • Fax: (619) 235-5209

**WORK FORCE REPORT****LOCAL WORK FORCE**

The objective of the *Equal Employment Opportunity Outreach Program*, San Diego Municipal Code Sections 22.3501 through 22.3517, is to ensure that contractors doing business with the City, or receiving funds from the City, do not engage in unlawful discriminatory employment practices prohibited by State and Federal law. Such employment practices include, but are not limited to unlawful discrimination in the following: employment, promotion or upgrading, demotion or transfer, recruitment or recruitment advertising, layoff or termination, rate of pay or other forms of compensation, and selection for training, including apprenticeship. Contractors are required to provide a completed *Work Force Report*.

**CONTRACTOR IDENTIFICATION**

Type of Contractor: ☐ Construction ☐ Vendor/Supplier ☐ Financial Institution ☐ Lessee/Lessor  
☒ Consultant ☐ Grant Recipient ☐ Insurance Company ☐ Other

Name of Company: Collaborative Services

AKA/DBA: \_\_\_\_\_

Address (Corporate Headquarters, where applicable): 427 C Street, Suite 200City San Diego County San Diego State California Zip 92101Telephone Number: (619) 232-2112 FAX Number: (619) 232-2012Name of Company CEO: Catherine Smith, JD

Address(es), phone and fax number(s) of company facilities located in San Diego County (if different from above):

Address: \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number: ( ) \_\_\_\_\_ FAX Number: ( ) \_\_\_\_\_

Type of Business: Public Outreach and Facilitation Type of License: \_\_\_\_\_The Company has appointed: Catherine Smith, JD

as its Equal Employment Opportunity Officer (EEOO). The EEOO has been given authority to establish, disseminate, and enforce equal employment and affirmative action policies of this company. The EEOO may be contacted at:

Address: 427 C Street, Suite 200, San Diego, CA 92101Telephone Number: (619) 232-2112 FAX Number: (619) 232-2012For Firm's: ☐ San Diego Work Force and/or ☐ Managing Office Work ForceI, the undersigned representative of Collaborative Services

(Firm Name)

San Diego, California hereby certify that information provided

(County)

(State)

herein is true and correct. This document was executed on this 21 day of August, 2008.

(Authorized Signature)

(Print Authorized Signature Name)

**WORK FORCE REPORT - Page 2**NAME OF FIRM: Collaborative ServicesDATE: August 21, 2008

INSTRUCTIONS: For each occupational category, indicate number of males and females in every ethnic group. Total columns in row provided. Sum of all totals should be equal to your total work force. Include all those employed by your company on either a full or part-time basis. The following groups are to be included in ethnic categories listed in columns below:

- |  |  |
|--|--|
| (1) African-American, Black                          | (5) Filipino                                       |
| (2) Latino, Hispanic, Mexican-American, Puerto Rican | (6) Caucasian                                      |
| (3) Asian, Pacific Islander                          | (7) Other ethnicity; not falling into other groups |
| (4) American Indian, Eskimo                          |  |

OCCUPATIONAL CATEGORY	(1) African-American		(2) Latino		(3) Asian		(4) American Indian		(5) Filipino		(6) Caucasian		(7) Other Ethnicities	
	(M)	(F)	(M)	(F)	(M)	(F)	(M)	(F)	(M)	(F)	(M)	(F)	(M)	(F)
Executive, Administrative, Managerial				.5								1.5		
Professional Specialty				.5						2	3	1.5		
Engineers/Architects														
Technicians and Related Support														
Sales														
Administrative Support/Clerical				1										
Services														
Precision Production, Craft and Repair														
Machine Operators, Assemblers, Inspectors														
Transportation and Material Moving														
Handlers, Equipment Cleaners, Helpers and Non-construction Laborers*														

\*Construction laborers and other field employees are not to be included on this page

TOTALS EACH COLUMN				2						2	3	3		
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GRAND TOTAL ALL EMPLOYEES

10

INDICATE BY GENDER AND ETHNICITY THE NUMBER OF ABOVE EMPLOYEES WHO ARE DISABLED:

DISABLED														
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NON-PROFIT ORGANIZATIONS ONLY:

BOARD OF DIRECTORS														
VOLUNTEERS														
ARTISTS														

## SUBCONTRACTORS LIST

### INFORMATION REGARDING SUBCONTRACTORS PARTICIPATION:

- a. SubContractor's List shall include name and complete address of all SubContractors who will receive more than one half of one percent (0.5%) of the Prime Consultant's fee.
- b. Consultant shall also submit SubContractor commitment letters on SubContractor's letterhead, no more than one page each, from SubContractors listed below to acknowledge their commitment to the team, scope of work, and percent of participation in the project.
- c. SubContractors shall be used for scope of work listed. No changes to this SubContractors List will be allowed without prior written City approval.

NAME AND ADDRESS SUBCONTRACTORS	SCOPE OF WORK	PERCENT OF CONTRACT	DOLLAR AMOUNT OF CONTRACT	* MBE/ WBE/DBE/ DVBE/OBE	** WHERE CERTIFIED
Warner Arch. & Design	Graphic Design	15	\$105,875	DBE	Caltrans
Translation Solutions	Translation	10	\$71,575	N/A	N/A

\* *For information only.* As appropriate, Consultant shall identify SubContractors as:

Certified Minority Business Enterprise	MBE
Certified Woman Business Enterprise	WBE
Certified Disadvantaged Business Enterprise	DBE
Certified Disabled Veteran Business Enterprise	DVBE
Other Business Enterprise	OBE

\*\* *For information only.* As appropriate, Consultant shall indicate if SubContractor is certified by:

City of San Diego	CITY
State of California Department of Transportation    CALTRANS	



# WARNER

ARCHITECTURE+DESIGN

August 21, 2008

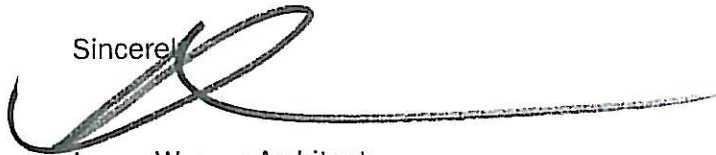
Catherine Smith  
Collaborative Services  
427 C Street, Suite 200  
San Diego, CA 92101

**Subject: Letter of Commitment to Subcontract  
Professional Public Outreach, Involvement, and Facilitation Services for the  
City of San Diego Uptown, Greater North Park, and Greater Golden Hill  
Community Plan Update Process**

Dear Ms. Smith:

Warner Architecture + Design is pleased to be part of the Collaborative Services Consultant Project Team for the above referenced project. It is our understanding that our firm's role will be to assist in providing as-needed graphic design support for the project. Our firm is committed to providing the necessary resources for the successful completion of this project.

Sincerely,

A handwritten signature in dark ink, appearing to be 'Laura Warner', with a long, sweeping horizontal line extending to the right.

Laura Warner, Architect  
President





## TRANSLATION SOLUTIONS

13941 Capewood Lane  
San Diego, California 92128  
Telephone: (858) 613-0936 Fax: (858) 613-0064  
E-mail: [info@translationsolutions-us.com](mailto:info@translationsolutions-us.com)  
Web site: [www.translationsolutions-us.com](http://www.translationsolutions-us.com)

August 21, 2008

Ms. Catherine Smith  
Collaborative Services  
427 C St., Suite 200  
San Diego, CA 92101

Re: City of San Diego Uptown, Greater North Park, and Greater Golden Hill  
Community Plan Update Process – Professional Public Outreach, Involvement,  
and Facilitation Services (9439-09-Z)

Dear Ms. Smith:

Translation Solutions is pleased to join the Collaborative Services team for the Professional Public Outreach, Involvement, and Facilitation Services proposal for the City of San Diego Uptown, Greater North Park, and Greater Golden Hill Community Plan Update Process. We are committed to the Collaborative Services' team to provide as-needed translation services. I attest that the information contained in our submittal is truthful, accurate, and complete.

I appreciate your interest in Translation Solutions and look forward to working with Collaborative Services and the City of San Diego on this project.

Respectfully,

A handwritten signature in black ink, appearing to read 'Cheryl Gans', followed by a long horizontal line.

Cheryl Gans  
Senior Project Manager, Translation Solutions